## Rec'd POT/PTO 12 JUL 2005

## DECLARATION AND POWER OF ATTORNEY U.S.A.

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ALL	PATENTS, INCLUDING DESIGN
FOR	APPLICATION BASED ON PCT; PARIS CONVENTION;
NON	PRIORITY: OR PROVISIONAL APPLICATIONS

As a below named inventor, I declare that my residence, post office address and citizenship are stated below next to my name, the information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed at 201 below), or an original, first and joint inventor (if plural inventors are named below at 201-203, or on additional sheets attached hereto) of the subject matter which is claimed and for which patent is sought on the invention entitled: METHOD FOR THE CORRECTION OF VARIATIONS IN THE AMOUNT OF INK APPLIED TO THE PRINTED IMAGE OCCURRING IN THE PRINTING PROCESS X PCT International Application No. PCT/EP04/000416 filed January 15, 2004 which is described and claimed in: the attached specification filed the specification in application Serial No. (if applicable) and amended on I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed: Priority Claimed Prior Foreign Application(s) х 103 02 747.5 Germany 24 January 2003 (Day/Month/Year Filed) (Number) (Country) (Day/Month/Year Filed) (Country) (Number) (Day/Month/Year Filed) (Country) (Number) I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below: Filing Date Filing Date Application No. I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application (Filing Date) (Status: patented, pending, abandoned) (Application Serial No.) POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorneys (Registration No. ) to prosecute this application, receive and act on instructions from my agent, and transact all business in the Patent and Trademark Office connected therewith. HARVEY B. JACOBSON, JR. (20,851); JOHN CLARKE HOLMAN (22,769); MARVIN R. STERN (20,640); ALLEN S. MELSER (27,215); MICHAEL R. SLOBASKY (26,421); JONATHAN L. SCHERER (29,851); IRWIN M. AISENBERG (19,007); WILLIAM E. PLAYER (31,409); YOON S. HAM (45,307) and NATHANIEL A. HUMPHRIES (22,772) DIRECT TELEPHONE CALLS TO: SEND CORRESPONDENCE TO: CUSTOMER NO. 00136 (please use Attorney's Docket No.) (202) 638-6666 JACOBSON HOLMAN JACOBSON HOLMAN PROFESSIONAL LIMITED LIABILITY COMPANY PROFESSIONAL LIMITED LIABILITY COMPANY 400 SEVENTH STREET, N.W. WASHINGTON, D.C. 20004 \*Inventor(s) name must include at least one unabbreviated first or middle name MIDDLE NAME **GIVEN NAME** FULL NAME FAMILY NAME OF NVENTOR KRUEMPELMANN <u>Martin</u> COUNTRY OF CITIZENSHIP **RESIDENCE &** STATE OR FOREIGN COUNTRY CITIZENSHIP **Germany** \_engerich Germany POST OFFICE POST OFFICE ADDRESS STATE OR COUNTRY ZIP CODE ADDRESS Germany 49525 Eduard-Lagemann-Strasse 22 \_engerich FAMILY NAME GIVEN NAME MIDDLE NAME FULL NAME OF INVENTOR POETTER <u>Dietmar</u> COUNTRY OF CITIZENSHIP RESIDENCE & STATE OR FOREIGNICOUNTRY CITIZENSHIP Westerkappeln Germany Germany POST OFFICE STATE OR COUNTRY ZIP CODE POST OFFICE ADDRESS CITY **ADDRESS** 49492 Westerkappeln Germany Kortheider Weg 73 GIVEN NAME MIDDLE NAME FULL NAME \* FAMILY NAME OF INVENTOR

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are partishable by fine or imprisonment or both, under section 1001 of Title 18 of the United States Code; and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

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SIGNATU	RE/OF INVE	NŢ	OR 20//7		Sign	NATURE OF INV	ENTO	97/		SIGNATURE OF INVENTOR 203*
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DATE	22 40	7	Bun	e 2005	DX	E ///	22	60	2005	DATE
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Additional inventors are named on separately numbered sheets attached hereto.

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